

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000175422

**Entity Name:** COMMERCIAL PAVEMENT PROS, LLC

**Current Principal Place of Business:**

13639 TWIN LAKES LN  
TAMPA, FL 33618

**Current Mailing Address:**

13014 N DALE MABRY HWY  
STE 812  
TAMPA, FL 33618 US

**FEI Number:** 47-2249182

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STROUSE, MICHAEL  
13639 TWIN LAKES LN  
TAMPA, FL 33618 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name STROUSE, J M  
Address 13639 TWIN LAKES LN  
City-State-Zip: TAMPA FL 33618

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** J M STROUSE

**OWNER**

**01/16/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date